## Notification of lazardous Waste Site

**United States Environmental Protection** Agency Washington DC 20460

is

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compen- paper. Indicate the letter of the item sation, and Liability Act of 1980 and must which applies.

Please type or print in ink. If you need additional space, use separate sheets of

	be mailed by June 9, 1981.			115.000	u oca	
	Person Required to Notify:			6 1LS-000-001-1	t x 3	
	Enter the name and address of the person or organization required to notify.		Name RESINITE DEPARTMENT Street 1201 PINE HILL RD.			
			Street / & UT /		20113	
_			City GRIPPI	State GA Zip Code	30223	
В	Enter the common name (if known) and actual location of the site.		Name of Site MOI	RTL Shoke MATIL		
			Street 2500 COMMONWEALTH AU.  NORTH Chicago County FALE State IL Zip Code 6006 4			
7						
C						
	Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.		Name (Last, First and Title) PENCZEK, R. J. (PLT. MGR)  Phone (404) 228-4600			
D	Dates of Waste Handling:					
	Enter the years that you estimate treatment, storage, or disposal be ended at the site.		From (Year) 1974	/ <sub>To (Year)</sub> / 974		
	Waste Type: Choose the option you prefer to complete					
	Option I: Select general waste types and so you do not know the general waste types or encouraged to describe the site in Item I—D		sources, you are	<b>Option 2:</b> This option is available to persons famile Resource Conservation and Recovery Act (RCRA) segulations (40 CFR Part 261).		
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap Check each applicable category.	Source of Waste: Place an X in the appropriate boxes.		Specific Type of Waste: EPA has assigned a four-digit number to each haz listed in the regulations under Section 3001 of RC appropriate four-digit number in the boxes provide the list of hazardous wastes and codes can be obt contacting the EPA Region serving the State in with	RA. Enter the d. A copy of ained by	
	1. X Organics	1. 🗆 Mi	•	located.		
	2. 🗆 Inorganics	2. □ Co 3. □ Te:	nstruction			
	Solvents     Pesticides	3. □ 1e. 4. □ Fe				
	5. ☐ Heavy metals		per/Printing			
			ather Tanning			
			n/Steel Foundry			
			emical, General			
	9.   Mixed Municipal Waste		ating/Polishing			
	10. □ Unknown		litary/Ammunition			
	17. A Other (Specify) Amintis, Amines,		ectrical Conductors ansformers			
	TMIDES. PLASTIZES		ility Companies	0.00000 "" - 01		
			nitary/Refuse	18 A- NUL		
		15. □ Ph	•			
		16. 🗆 La	b/Hospital	EPA Region 5 Record	s Ctr	
		17. 🗆 Un		HOURE HAN HAN HAN AND THE	# 5 U.	
	at Who	18. 🗆 Ot	her (Specify)	I KADARA HIYAY BAHAI HABAI HABAN MINA HABA	II	
T A	1		<del></del>	357434		
السل	Form Approved					
	OMB Nc. 2000-0138					
	EPA Form 8900-1					

	Notification of Hazardous Waste Site	Side Two	· · · · · · · · · · · · · · · · · · ·		
F	Waste Quantity:	Facility Type	Total Facility Waste Amount		
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. ☐ Piles	cubic feet		
	In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.		gallons		
		4. 🗆 Tanks	Total Facility Area		
		<ol> <li>5. ☐ Impoundment</li> <li>6. ☐ Underground Injection</li> </ol>	square feet		
	In the "total facility area" space, give the estimated area size which the facilities	7.  Drums, Above Ground	acres		
	occupy using square feet or acres.	8. Drums, Below Ground 9. TO Other (Specify)	cessing/RECYCling.		
G	Known, Suspected or Likely Releases to				
	Place an X in the appropriate boxes to indicate or likely releases of wastes to the environment		☐ Known ☐ Suspected ☐ Likely ☐ None		
	Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.				
Н	Sketch Map of Site Location: (Optional Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location	I)			
_	Description of Site: (Optional)				
•	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.				
	Signature and Title:				
	The person or authorized representative such as plant managers, superintendents, rustees or attorneys) of persons required	Name	— □ Owner, Present □ Owner, Past		
		Street	□ Transporter		
	in item A). For other persons providing	City State	☐ Operator, Present ☐ Operator, Present ☐ Operator, Past		
	Check the boxes which best describe the		\ □ Other		
	required to notify. If you are not required to notify check "Other".	Signature AND DATE PRO	SEM Date		